

May 12 05 08:59a

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p.1

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**FACSIMILE TRANSMITTAL**

|                                    |                  |                       |
|------------------------------------|------------------|-----------------------|
| DATE: 05/12/2005                   | FROM:            | Samuel A. Kassatly    |
| TO: Examiner Nathan Hillery        | TELEPHONE NO.:   | (408) 323-5111        |
| U.S. Patent and Trademark Office   | FACSIMILE NO.:   | (408) 323-5112        |
| Group Art Unit: 2176               | ATTY DOCKET NO.: | ARC920010034US1       |
| <b>FACSIMILE NO.:</b> 703 872-9306 | SUBJECT:         | Amendment After Final |

**Title:** "System and Method for Associating a Destination Document to a Source Document During a Save Process"

**Applicant(s):** Reiner Kraft

**Attorney Docket No.:** ARC920010034US1

**Serial No.:** 09/825,210

**Filing Date:** 04/02/2001

TOTAL NUMBER OF PAGES INCLUDING THIS COVER PAGE 11.

**THANK YOU FOR FORWARDING THIS DOCUMENT TO EXAMINER Nathan Hillery**  
**AS SOON AS POSSIBLE.**

Respectfully submitted,



\_\_\_\_\_  
Samuel A. Kassatly  
Reg. No. 32,247  
Date: 05/12/2005

Enclosure: Amendment After Final

**CERTIFICATE OF FAXING**

I hereby certify that this correspondence is being faxed to the U.S. Patent and Trademark Office, to fax No. 703 872-9306, on 05/12/2005.



\_\_\_\_\_  
Samuel A. Kassatly

PTC/SB/21 (08-03)

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(to be used for all correspondence after initial filing)

|  |    |                        |                 |
|--|----|------------------------|-----------------|
|  |    | Application Number     | 09/825,210      |
|  |    | Filing Date            | 04/02/2001      |
|  |    | First Named Inventor   | Reiner Kraft    |
|  |    | Art Unit               | 2176            |
|  |    | Examiner Name          | Nathan Hillery  |
| Total Number of Pages in This Submission | 11 | Attorney Docket Number | ARC920010034US1 |

**ENCLOSURES (Check all that apply)**

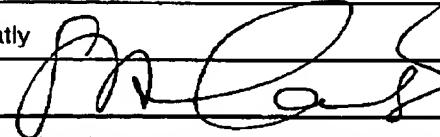
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| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition to Revive                               | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input checked="" type="checkbox"/> After Final                              | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Assignment Recordation documents                                  |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Change of Correspondence Address                 | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):            |
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| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund                               | 2) Facsimile cover page  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s) _____                        |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   | <input type="checkbox"/> Remarks  |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|                         |  |  |  |
|-------------------------|--|--|--|
| Firm or Individual name | Samuel A. Kassathly  |  |  |
| Signature               |  |  |  |
| Date                    | 05/12/2005   |  |  |

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|                       |  |  |  |
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| Typed or printed name | Samuel A. Kassathly  |  |  |
| Signature             |  |  |  |
| Date                  | 05/12/2005   |  |  |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)  
0.00

## Complete if Known

|                      |                 |
|----------------------|-----------------|
| Application Number   | 09/825,210      |
| Filing Date          | 04/02/2001      |
| First Named Inventor | Reiner Kraft    |
| Examiner Name        | Nathan Hillery  |
| Art Unit             | 2176            |
| Attorney Docket No.  | ARC920010034US1 |

## METHOD OF PAYMENT (check all that apply)

Check    Credit Card    Money Order    None    Other (please identify): \_\_\_\_\_

Deposit Account   Deposit Account Number: 09-0441   Deposit Account Name: International Business Machines

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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| <input checked="" type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |              | SEARCH FEES |              | EXAMINATION FEES |              | Fees Paid (\$) |
|------------------|-------------|--------------|-------------|--------------|------------------|--------------|----------------|
|                  | Fee (\$)    | Small Entity | Fee (\$)    | Small Entity | Fee (\$)         | Small Entity |                |
| Utility          | 300         | 150          | 500         | 250          | 200              | 100          | 0              |
| Design           | 200         | 100          | 100         | 50           | 130              | 65           | 0              |
| Plant            | 200         | 100          | 300         | 150          | 160              | 80           | 0              |
| Reissue          | 300         | 150          | 500         | 250          | 600              | 300          | 0              |
| Provisional      | 200         | 100          | 0           | 0            | 0                | 0            | 0              |

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Total Claims  | Extra Claims   | Fee (\$) | Fee Paid (\$) | Small Entity |          |
|---|----------------|----------|---------------|--------------|----------|
|   |                |          |               | Fee (\$)     | Fee (\$) |
| 20  | - 20 or HP = 0 | x 50     | = 0           | 50           | 25       |
| HP = highest number of total claims paid for, if greater than 20. |                |          |               | 200          | 100      |

| Indep. Claims | Extra Claims  | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |               |
|---------------|---------------|----------|---------------|---------------------------|---------------|
|               |               |          |               | Fee (\$)                  | Fee Paid (\$) |
| 3             | - 3 or HP = 0 | x 200    | = 0           | 360                       | 0             |

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
|              |              | - 100 = / 50 = (round up to a whole number)      | x        | = 0           |

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

Fees Paid (\$)

0

0

## SUBMITTED BY

|                   |   |   |                        |
|-------------------|---|---|------------------------|
| Signature         |  | Registration No. 32,247<br>(Attorney/Agent) | Telephone 408-323-5111 |
| Name (Print/Type) | Samuel A. Kassatty  |   | Date 05/12/2005        |

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PATENT  
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IN THE UNITED STATES  
PATENT AND TRADEMARK OFFICE

**Title:** "System and Method for Associating a Destination Document to a Source Document During a Save Process"

**Applicant:** Reiner Kraft

**Attorney Docket No.:** ARC920010034US1

**Serial No.:** 09/825,210

**Examiner:** Nathan Hillary

**Filing Date:** April 2, 2001

**Art Unit:** 2176

Mail Stop: Amendment  
Commissioner for Patents  
P.O.Box 1450  
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL

Sir:

Applicant submits this Amendment in partial response to the Final Office Action of March 17, 2005, in order to place the claims in condition for appeal, and respectfully request that it be entered.

The amendments to the Claims are reflected in the listing of the claims that begins on page 2 of this paper.

The Remarks section begins on page 7 of this paper.